#### **Application Data Sheet**

#### **Application Information**

Application number::

Filing Date:: Herewith

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R??::
Number of CD disks::

Number of copies of CDs::

Sequence Submission::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title:: TECHNIQUES FOR GENERATING A

COVERSHEET FOR A PAPER-BASED

INTERFACE FOR MULTIMEDIA INFORMATION

Attorney Docket Number:: 015358-007500US

Request for Early Publication:: No

Request for Non-Publication:: Yes

Suggested Drawing Figure:: 17

Total Drawing Sheets:: 34

Small Entity?:: No

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers One::

No Secrecy Order in Parent Appl.::

**Applicant Information** 

Name Suffix::

Middle Name::

Inventor Applicant Authority Type::

US Primary Citizenship Country::

Full Capacity Status::

Jonathan Given Name::

J. Middle Name::

Hull Family Name::

State or Province of Residence::

San Carlos City of Residence::

US Country of Residence::

751 Laurel Street PMB 434 Street of Mailing Address::

CA

San Carlos City of Mailing Address::

State or Province of mailing address:: CA

US Country of mailing address::

Postal or Zip Code of mailing address:: 94070

Inventor Applicant Authority Type::

US Primary Citizenship Country::

**Full Capacity** Status::

Given Name:: Jamey

Graham Family Name::

Name Suffix::

City of Residence:: San Jose

CA State or Province of Residence::

US Country of Residence::

1196 Shasta Avenue Street of Mailing Address::

The state of the s å:i=

City of Mailing Address::

San Jose

State or Province of mailing address::

CA

Country of mailing address::

US

Postal or Zip Code of mailing address:: 95126

# **Correspondence Information**

Correspondence Customer Number::

20350

Representative Information

Representative Customer Number::

20350

**Domestic Priority Information** 

Application::

Continuity Type::

Parent Application:: Parent Filing Date::

This Application

Continuation-in-part of

09/149,921

09/09/98

# **Foreign Priority Information**

Country::

Application number::

Filing Date::

### **Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::